

D.I. # _____

**CIVIL ACTION
NUMBER: 08-197 JJF**

U.S. POSTAL SERVICE
CERTIFIED MAIL RECEIPT(S)

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> ■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits. 		<p>A. Signature  <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by Printed Name <u>Roderick L. Souter</u> C. Date of Delivery <u>MAY 22 2008</u></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If YES, enter delivery address below:</p> <p><u>MAY 22 2008</u></p> <p>E. Service Type <input type="checkbox"/> Certified Mail <input checked="" type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p> <p>F. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>	
<p>1. Article Addressed to:</p> <p>LOREN MEYERS DEPUTY ATTORNEY GENERAL DEPARTMENT OF JUSTICE 820 T. F. FRENCH STREET WILMINGTON DE 19801</p> <p>RODRICK L. SOUTER</p> <p>U.S. DISTRICT COURT</p> <p>2008 MAY</p>			
<p>2. Article Number <u>7007 3020 0002 3321 4417</u></p> <p>(Transfer from service label)</p>			

PS Form 3811, February 2004

7007 3020 0002 3321 4417

5-02-M-1540

Scanned- KSR 5/23/08